

United States District Court for the Southern District of West Virginia

APPLICATION TO PROCEED IN FORMA PAUPERIS AND AFFIDAVIT

PAMELA L. LUCAS
Plaintiff

v.

CASE NUMBER:

INTERNAL REVENUE SERVICE
Defendant

2:03-0339

APR 17 2003

SAMUEL L. KAY, CLERK
U.S. DISTRICT & BANKRUPTCY COURTS
SOUTHERN DISTRICT OF WEST VIRGINIA

1. PAMELA L. LUCAS declare that I am the (check appropriate box)

☒ petitioner/plaintiff/movant ☐ other in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 U.S.C. §1915, I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion. The nature of this action is:

REFUND OF LEVIED MONEY 5018.19 + INTEREST

If this affidavit is filed in support of an application to proceed on appeal in forma pauperis, the issues I intend to present on appeal are briefly stated as follows:

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated?: ☐ Yes ☒ No (If "No" go to No: 2)

If "Yes" state the place of your incarceration _____

Are you employed at the institution? _____ Do you receive any payment from the institution? _____

Have the institution fill out the Certificate portion of this application and attach a ledger sheet from the institution(s) of your incarceration showing at least the past six months' transactions.

2. Are you currently employed? ☐ Yes ☒ No

a. If the answer is "Yes" state the amount of your take-home salary or wages and pay period and give the name and address of your employer.

b. If the answer is "No" state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer.

09/14/01 OUT OF WORK DUE TO KIDNEY DISEASE. UNABLE TO WORK.

3. In the past twelve months have you received any money from any of the following sources?*

- a. Business, profession or other self-employment
b. Rent payments, interest or dividends
c. Pensions, annuities or life insurance payments
d. Disability or workers compensation payments
e. Gifts or inheritances
f. Any other sources

Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒

*If the answer to any of these is "Yes", describe each source of money and state the amount received and what you expect you will continue to receive in the space provided below:

4. Do you have any cash or checking or savings accounts? ☒ Yes ☐ No

If "Yes" state the total amount. Approx. \$ 20⁰⁰

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property?
☐ Yes ☒ No

If "Yes" describe the property and state its value.

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support.
7. I do hereby stipulate that the recovery, if any, obtained in this action shall be paid to the Clerk of Court, who shall pay therefrom all unpaid costs taxed against plaintiff and pay the balance to plaintiff and his/her attorney, if any.

I declare under penalty of perjury that the above information is true and correct.

04/14/03
DATE

Pamela S. Lucas
SIGNATURE OF APPLICANT

STATE OF WEST VIRGINIA:
COUNTY OF _____

The foregoing instrument was acknowledged before me this _____
(month, day, year)

BY _____

My commission expires: _____

Notary Public

CERTIFICATE

(Incarcerated applicants only)
(To be completed by the Institution of Incarceration)

I certify that the applicant named herein has the sum of \$ _____ on account to his/her credit (name of institution) _____. I further certify that the applicant has the following securities to his/her credit _____

I further certify that during the past six months the applicant's average balance was \$ _____, and the average of monthly deposits was \$ _____

DATE

SIGNATURE OF AUTHORIZED OFFICER